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<b>TRANSMITTAL FORM</b> (to be used for all correspondence after initial filing)	Application Number	09/683,912	<b>RECEIVED</b> <b>CENTRAL FAX CENTER</b> <b>DEC 12 2003</b>
	Filing Date	March 1, 2002	
	First Named Inventor	Derek Bernhart	
	Art Unit	1631	
	Examiner Name	James Martinell	
Total Number of Pages in This Submission	2	Attorney Docket Number	3348.3

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) ____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <b>Response to Restriction Requirement</b>
Remarks		

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Philip L. McGarrigle Reg. No. 31,395
Signature	<i>Philip McGarrigle</i>
Date	December 12, 2003

## CERTIFICATE OF MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
Typed or printed name	Gilda T. Carr	Date	December 12, 2003
Signature	<i>Gilda T. Carr</i>		

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PATENT  
Attorney Docket No. 3348.3

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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DEC 12 2003

Applicant: Bernhart, et. al.

Examiner: James Martinell

Serial No: 09/683,912

Art Unit No.: 1631

Filing Date: March 1, 2002

Title: System and Method for  
Management of Microarray and  
Laboratory Information

RESPONSE TO RESTRICTION  
REQUIREMENT

Commissioner for Patents  
P. O. Box 1450  
Alexandria, VA 22313-1450

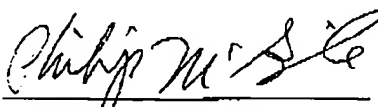
Sir:

In response to the November 20, 2003 Restriction Requirement, Applicants hereby elect the claims of Group II, Claims 9 – 42, without traverse. Applicants also reserve the right to represent non-elected claims in a divisional or other related application.

Applicants believe that no fee is required. However, if a fee is required, the Commissioner is hereby authorized to deduct such fee from the undersigned's Deposit Account, 01-0431.

Respectfully submitted,

Dated: December 12, 2003



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